



Briargrove Elementary School

After School Excellence

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REGISTRATION GUIDE FALL 2016 AVAILABLE ONLINE BEGINNING MAY 11

DOWNLOAD COMPLETE REGISTRATION GUIDE FROM <http://www.houstonisd.org/Domain/12147>

Registration Info	Dates	Where
On Site Early Registration (Registration Fee of \$15.00 and is first come first serve.)	May 11 – May 25	School Office
Mail In Early Registration U.S. Postmark Date dictates order of your registration (Registration Fee of \$15.00 and is first come first serve.)	May 26 - June 30	CIASP 2020 SW Freeway, Ste. 310 Houston, TX 77098
Mail In Late Registration *Register Late - \$25.00 Registration Fee	June 30 – Aug 12	CIASP 2020 SW Freeway, Ste. 310 Houston, TX 77098
On Site Late Registration *Register Late - \$25.00 Registration Fee	Beginning Aug 15	In ASP Office
Add-Drop Deadline	Until Sept. 13	In ASP Office
Extended Day Dates	Aug 22 – May 25	On Site
Fall Enrichment Classes	Sept 6 – Dec 16	On Site
5 Early Dismissal Dates	Sept 21, Oct 11, Nov 16, Jan 25, Feb 22	On Site

After School Ext Day & Enr Options Offered for School Year 2016-2017:

Option Type	To what time?	Bi-Weekly Cost	Total	Supply Fee (\$50.00 one time fee per semester)	Pymt Schedule
Full Time Plus Ext Day	6:30 PM	\$130.00	\$1105.00	\$50.00	Bi-Weekly
Full Time Ext Day	6:00 PM	\$110.00	\$935.00	\$50.00	Bi-Weekly
Half Time Ext Day	5:00 PM	\$85.00	\$722.50	\$50.00	Bi-Weekly
Occasional Ext Day (5 units)	6:30 PM	\$80.00 (5 units)	\$80.00	\$35.00	In Full
Early Dismissal (5 days; this is already included in Full & Half Time Ext Day)	3:00 PM	\$15.00/day	\$75.00	\$35.00	In Full
Fall Enrichment (Spring 2017 Registration will be held in December)	3:30-4:30 4:35-5:35	See schedule in this packet			4 Month Pymt Plan
Bridge to 2nd Hour Class	4:30	\$70.00/day			4 Month Pymt Plan

Bi-Weekly Payment Plan Option for Ext Day ONLY:

Fall 2016: At Registration, Sept. 2, Sept. 16, Sept. 30, Oct. 14, Oct. 28, Nov. 11, Nov. 22, Dec. 9

Spring 2017: Jan. 6, Jan. 20, Feb. 3, Feb. 17, Mar. 3, Mar. 24, Apr. 7, Apr. 21, May 5, May 19

(NOTE: The total cost for Full & Half Time includes a discount for the Week of Thanksgiving.)

4 Month Fall Payment Plan for Enrichment Classes and Ext. Day

(NOTE: Registration for Spring Enrichment Classes is scheduled in December.)

Fall 2016: At Registration, Sept. 2; Oct. 7; Nov. 4

Spring 2017: At Registration, Jan 20, Feb. 17, Mar. 24

(Spring Enrichment Registration will be held in Dec.)

***Any Fall 2016 outstanding balances \$100.00 or greater remaining after December 9 will be rolled over to the Spring 2017 with a \$25.00 rollover fee assessed. Any Spring 2017 outstanding balances \$100 or greater remaining after May 19 will be rolled over to the Fall 2017 with a \$25.00 rollover fee.

Make your money order or check payable to: Briargrove Elementary School

Questions: Contact Sylvia Ponce de Leon, Director: ciasp2@sbcglobal.net OR 713-529-3507

Parent Copy

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Briargrove Elementary School

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Dear Briargrove Parents,

Briargrove Elementary is proud to present **your After School Program!** We look forward to serving you with "After School Excellence" for your child.

Enclosed in this packet are the following forms:

- **Schedule of Dates/deadlines (see front cover page)**
- **Extended Day Schedule of Options**
- **Master Schedule of Enrichment Classes**
- **Optional Homework Help Registration Form**
- **Tuition/Fee Payment Form**
- **Authorization/Emergency Form**
- **Contract Agreement/Safety Plan**

Dependent upon what you are registering for, please submit the following forms:

- **Page 5 Extended Day Registration Form**
- **Page 6 Homework Registration Form**
- **Page 9-11 Master Schedule of Enrichment Classes**

The following forms are REQUIRED to turn in:

- **Page 7-8 Contract Agreement/Safety Plan**
- **Page 12 Authorization/Emergency Form**
- **Page 13 Tuition Fee Payment Form**

IMPORTANT INFORMATION FOR YOU TO KNOW:

1. **REGISTRATION:** Registrations are processed as they are received. The date and/or order of registration submission will be recorded.
 - **Beginning May 10:** Registration forms are available online: <http://www.houstonisd.org/Domain/12147>
 - **Refer to the deadlines listed on the front cover of the registration packet.**
 - **By August 12:** Registrations received by July 31 will receive a statement via U.S. mail by August 12.
 - **Beginning August 15:** Statements for Registrations received after July 31 will be available for pick up in the After School Office beginning August 15.
2. **OUTSTANDING BALANCES:** Registration cannot be accepted from anyone who has an outstanding balance from any previous semester. Registrations submitted must include a separate payment for their outstanding balance in addition to their first payment. In addition, any Fall accounts with **outstanding balances remaining after December 9, 2016 will be assessed a \$25.00 fee which will be rolled over to the Spring 2017 semester** and any accounts with **outstanding balances remaining after May 19, 2017 will be assessed a \$25.00 fee which will be rolled over to the Fall 2017 semester**. Failure to meet your financial obligations may result in suspension of services to you.
3. **PAYMENT:** You may either pay the full amount of your bill at the time of registration or you may pay in 4 installments. This is offered as a convenience to you. Please see the Contract Agreement Safety Plan Form for important details including deadlines.
4. Please note the following important details regarding your choices for Enrichment Classes:
 - Registration is on a first come first serve basis. Once a class is filled, it will be closed.
 - If you enrolled in an enrichment class and it is canceled due to lack of enrollment, a full refund for that class will be issued. In the event of teacher illness, a substitute will be provided OR students will be contacted as early as possible to inform them of a class cancellation. In addition, every effort will be made to set up a make up time. Otherwise, your account will be credited for the class not held.

We are looking forward to a successful Fall 2016 Semester! If you have any other concerns and/or questions, please do not hesitate to contact us.

Sincerely,
Sylvia Ponce de Leon,
Director, CIASP
713-529-3507
email: ciasp2@sbcglobal.net



Briargrove Elementary School

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Contract Agreement/Safety Plan

Fall 2016

By signing below, I understand the contents of this registration packet and agree to the following for the FALL 2016. Disregard of this contract and/or the contents in the registration packet will result in immediate dismissal from the Briargrove Elementary School After School Program.

1. I understand I am presently enrolling **for FALL 2016**. Also, I understand that if I **enroll for the Fall 2016 in Full or Half Time Extended day, I will automatically be enrolled in the Spring 2017 unless I have notified in writing the after school office that my child will not be reporting to Extended Day in Spring 2017 or at any other time.** Also, I understand that if I do withdraw and re-enroll, there is a \$25.00 Reinstatement Fee I will be assessed.
2. **TIMELINES:** I have received a copy of the timeline with all important dates, including registration dates, payment due dates, and the dates that Extended Day and Enrichment Classes begin and end. (Timeline is on front cover.)
3. **CLASS TIMES:** I understand the times of Extended Day, Enrichment Classes, and Homework Assistance as listed on page 5 and on the Master Schedule of Enrichment Classes provided in this registration packet.
4. **PAYMENTS:** *(Please initial each item below on the line)*
 - ☐ **MUST BE SUBMITTED** by check or money order only payable to Briargrove Elementary School. Cash is not accepted.
 - ☐ If I choose the Bi Weekly Option or the 4 Month Payment Plan for Full or Half Time Ext Day, I will pay at least the minimum due on the due dates, as stated on the front cover page and on page 5. In addition, I understand the 4 Month Payment Plan option is the only payment option for Enrichment Classes.
 - ☐ I will be assessed a monthly late fee of \$10.00 after Sept. 9, Oct. 14, Nov. 11.
 - ☐ I will be assessed a \$35.00 charge for each returned check. After 2 returned checks, payment must be made by money order. Upon notification that a check was returned by my bank, I understand that I must submit a money order for the same amount within 48 hrs. Failure to do so will result in suspension of services.
 - ☐ I understand that after school services may be suspended if I do not pay my bill on time. In addition, any accounts with **outstanding balances remaining after December 9, 2016 will be assessed a \$25.00 fee which will be rolled over to the Spring 2017 semester.** Also, any Spring 2017 outstanding balance I may have in my account after May 19 will be rolled over to Fall 2017 with a \$25.00 rollover fee. Failure to meet your financial obligations may result in suspension of services to you.
5. **ADD/DROP:** Only 2 changes are permitted during Add/Drop. No class changes will be made and **no refunds or credits** will be issued after Sept.13.
6. **PRORATION OF CLASSES:** ANY class attended from Sept. 6-13 will be prorated. In addition, if you withdraw from a class, your bill will be prorated ONLY if your child is required to attend Tutoring Classes by his/her school teacher or if your child withdraws from Briargrove Elementary School. **In addition, no refunds will be assessed in the event of HISD canceling after-school activities for inclement weather or any other extenuating circumstances or if your child is absent from the school or after school.**
7. **OCCASIONAL DAYS:**
 - If I purchase Occasional Days and all units are used, another 5-Unit Occasional Card will be **automatically billed** to my account.
 - I understand that any Occasional Day purchases billed after NOV 22 **MUST BE PAID WITHIN IN 24 HOURS** OR THERE WILL BE NO SERVICES PROVIDED.



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Contract Agreement/Safety Plan

Fall 2016

8. **SIGNING CHILDREN OUT:** Either myself or other individuals authorized to pick up my child **must sign my child out** from the After School Staff. Failure to sign the student out will be regarded as an "Incident" and may result in suspension from the program for the remaining school year. **SHOWING PHOTO ID IS MANDATORY.**
9. **ENRICHMENT CLASSES BEGINNING AFTER 3:30 ONLY:** I **must** enroll my child in either a 3:30 enrichment class, Bridge UNTIL class time of Enrichment, or Occasional Extended Day in order for my child to participate in an Enrichment Class after 3:30.
10. **LATE PICK UP:**
 - If my child is picked up after 6:30 PM I understand I will be assessed a late pickup fee of **\$5.00/minute.**
 - When I am late picking up my child from Full Time, Half-Time or Enrichment, I understand I will be **automatically issued a 5-Unit Occasional Card**, which provides supervision until 6:30 PM.
 - After the 5th late pick-up I may be asked to make other arrangements for After School Child Care.
 - The official time for our after school program will be gauged by the school clock.
 - **Please Note: If late pick-up fees are not paid within 24 hours, the fee is automatically doubled** (Check or money order only).
11. **CHANGES IN HOW A STUDENT GETS HOME:** I **MUST** notify the ASP Coordinator **in writing** (phone calls **not** accepted) via faxed or written note dropped off in the **ASP Office or in the ASP Box** (located in front school office) OR via **email (ciasp2@sbcglobal.net)** for **ANY** changes in how my child gets home. **ONLY** the adult who registers the child is authorized to make changes in regards to pick up arrangements. **Without written permission, my child will not be permitted to leave.**
13. **BEHAVIOR EXPECTATIONS:** The HISD Code of Student Conduct will serve as the basis for all discipline expectations to ensure the safety of all students and staff members. Parents will be notified immediately if their child has violated any portion of the school's previously communicated Code of Student Conduct. Services will be suspended should disrespectful or unsafe behavior be directed towards a student or staff member, either by a parent of a student or a student enrolled in the program. I understand that it is my responsibility for reading and knowing the expectations of the HISD Code of Conduct. I also understand that the program reserves the right to deny services on a permanent basis if behavior expectations are not being met.
14. **SPECIAL NEEDS:** We do not provide staff trained to deal with special needs. Please contact the school administration with any questions.
15. **TECHNOLOGY DEVICES:** No technology devices may be used in the after school program by any student in grades K-5. All such devices must be kept in the student's backpack.
16. I understand that my email address and/or phone number(s) may be given to the Provider of any Enrichment class in which I have enrolled my child should the Provider find it necessary to contact me.
17. **MEDIA PERMISSION:** I authorize the Briargrove Elementary After School Program to include my child in photographs used for publicity **YES** **NO**

_____/_____/_____/_____
Name of Parent (please print) Parent Signature Date **STUDENT NAME**

_____/_____/_____/_____
Name of Parent (please print) Parent Signature Date **STUDENT NAME**

Parent Copy



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Extended Day Registration Form Fall 2016

NOTE: Registration into Full or Half Time Ext Day (Occ Ext Day is not included) is for the entire school year. The Tuition and Fees listed below are only Fall Rates. In December you will receive the Spring 2017 Registration Packet. If you wish to withdraw from Ext Day, you must submit a written notice to the After School Program Office. Otherwise, your Full Time OR Half Time Ext day registration will continue without interruption for the Spring 2017. If you do withdraw and wish to RE-Enroll for any portion of Extended Day, a \$25.00 Administrative Reinstatement Fee will be assessed. Thank you.

Student's Name: _____

Grade Level: _____

2016-2017: Full, Half, Occasional & Early Dismissal Extended Day Program (√ Select One Option)							
Full & Half Time Extended Day							
Bi Weekly Payment Plan (Note the \$50.00 Supply Fee for Fall 2016)							
Full Time Ext Day PLUS 3:00-6:30/\$130/BI-WEEKLY	\$1155.00		8 payments of \$130; final payment of \$65.00 PLUS \$50.00 Fall Supply Fee = \$1155.00				
Full Time Ext Day 3:00-6:00/\$110/Bi-WEEKLY	\$985.00		8 payments of \$110; final payment of \$55.00 PLUS \$50.00 Fall Supply Fee = \$985.00				
Half Time Ext Day 3:00-5:00/\$85/BI-WEEKLY	\$772.50		8 payments of \$85; final payment of 42.50 PLUS \$50.00 Fall Supply Fee = \$772.50				
Full & Half Time Extended Day – 4 Payment Plan (Note the \$50.00 Supply Fee for Fall 2016)							
Full Time Ext Day PLUS 3:00-6:30/4 Payments	\$1155.00		4 payments of \$276.25 PLUS \$50.00 Fall Supply Fee = \$1155.00				
Full Time Ext Day 3:00-6:00/4 Payments	\$985.00		4 payments of \$233.75 PLUS \$50.00 Fall Supply Fee= \$985.00				
Half Time Ext Day 3:00-5:00/4 Payments	\$772.50		3 payments of \$180.63; final payment of \$180.61 PLUS \$50.00 Supply Fee = \$772.50				
Occ Ext Day – A One Time Supply Fee of \$50.00 for Fall 2016 is to be included in the first set of your Occ Ext Day Purchase per Semester							
		√5 Units	√10 Units	√15 Units	√20 Units	√25 Units	
Full Time Occasional Ext Day 3:00-6:30		\$80.00	\$160.00	\$240.00	\$320.00	\$400.00	
Half Time Occasional Ext Day 3:00-5:00		\$80.00	\$160.00	\$240.00	\$320.00	\$400.00	
FALL 2016 Bridge to Enrichment							
Bridge to Enrichment	\$70.00	Bridge of Time to cover ONLY 1 hour supervision before a 4:30 Enr Class on a per day basis.					
Early Dismissal PLUS \$35.00 SUPPLY FEE FOR THE 5 DAYS (to be paid in full)							
Early Dismissal Dates: 09/21, 10/11, 11/16, 01/25, 02/22	\$15.00	\$30.00	\$45.00	\$60.00	\$75.00		
NOTE: The total cost for Full & Half Time (NOT Occ Ext Day) includes the 5 Early Dismissal Days AND a discount for the Week of Thanksgiving.							
NOTE: Supply Fees are per semester. At the beginning of the Spring Semester, your account will be assessed an additional \$50.00 supply fee for Ext Day.							



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Homework Registration Form Fall 2016

Student's Name: _____ Grade Level: _____

GRADE LEVEL	ACTIVITY	TIME	√DAY OF WEEK				Students enrolled in homework assistance enr will be charged a per day of week fee for the whole semester on the day(s) selected.
HOMWORK STUDY TIME FOR FULL TIME EXTENDED DAY PARTICIPANTS			Mon	Tue	Wed	Thur	
1 st / 2 nd	Homework Assistance	3:30 – 4:30					
	Homework Assistance	4:35 – 5:35					
3 rd / 4 th	Homework Assistance	3:30 – 4:30					
	Homework Assistance	4:35 – 5:3					
4 th / 5 th	Homework Assistance	3:30 – 4:30					
	Homework Assistance	4:35 – 5:35					
Total Cost for FULL TIME PER DAY			\$0	\$0	\$0	\$0	
Total Cost for HALF TIME PER DAY			\$0	\$0	\$0	\$0	
HOMEWK ASSISTANCE ENR FOR STUDENTS NOT ENROLLED IN FT/HT EXT DAY			Mon	Tue	Wed	Thur	
1 st / 2 nd	Homework Assistance Enr	3:30 – 4:30					
3 rd / 4 th	Homework Assistance Enr	3:30 – 4:30					
4 th / 5 th	Homework Assistance Enr	3:30 – 4:30					
Total Cost for Fall 2016 Homework Enr PER DAY			\$115	\$115	\$115	\$115	

DESCRIPTION OF EXTENDED DAY OPTIONS	
<u>Full-Time Ext Day until 6:00 and 6:30</u>	Extended Day Supervision until 6:00 for Full Time Ext Day and until 6:30 for Full Time Ext Day PLUS.
<u>Half-Time Ext Day until 5:00</u>	Part-time Supervision until 5:00 PM daily. Minimum of 5 Occasional Ext Day Units will be added to your account if you pick up your child after 5:00 pm.
<u>Occasional Ext Day Units until 6:30</u>	Occasional Extended Day Units provide an economical choice for students needing intermittent services and may be purchased in increments of 5. PLEASE NOTE: Unused units from the Fall carry over to the Spring Semester, but may not be carried over to the next school year. At the end of the Spring Semester unused Occasional units are forfeited. The following applies to Auto Purchases as well.
<u>Bridge Enrichment</u>	Bridge Enrichment (up to 1 hour of time) is designed for students who enroll SOLELY in a Private Lesson at 4:00; 4:30 OR 4:30 pm Enrichment Class on a per day basis. Therefore, your child will be supervised ONLY the class time (up to 1 hour of time) before the Enrichment Class.
<u>Homework Assistance</u>	Homework assistance is available at NO COST for those enrolled ONLY in Full Time or Half Time Ext Day. This class is designed to provide a quiet environment away from your child's busy group. Our ASP Staff is not responsible for Tutoring or re-teaching a concept taught in your child's homeroom and reinforced in your child's homework. If your child is unable to complete his/her homework independently, the ASP Staff will notify you. For students enrolled ONLY in Enrichment, Occ Ext Day or Early Dismissal, the cost of homework is listed at the top of this page.
<u>Late Pick-up after Enr Classes</u>	If your child is enrolled ONLY in Enrichment Classes and you are late picking him/her up after the class time, you will be assessed an OCC Card of 5 units for late pick-ups. (Please see the Coordinator for further details when needed.)
<u>Late Pick-UP AFTER 6:30 PM</u>	If you pick up your child after 6:30 PM you will be assessed a late fee of \$5.00 per minute. If late pick-up fees are not paid within 24 hours, the fee is automatically doubled. (Check or money order only.) Also, after the 5th late pick-up I may be asked to make other arrangements for After School Child Care.



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Contract Agreement/Safety Plan Fall 2016

By signing below, I understand the contents of this registration packet and agree to the following for the FALL 2016. Disregard of this contract and/or the contents in the registration packet will result in immediate dismissal from the Briargrove Elementary School After School Program.

1. I understand I am presently enrolling **for FALL 2016**. Also, I understand that if I **enroll for the Fall 2016 in Full or Half Time Extended day, I will automatically be enrolled in the Spring 2017 unless I have notified in writing the after school office that my child will not be reporting to Extended Day in Spring 2017 or at any other time.** Also, I understand that if I do withdraw and re-enroll, there is a \$25.00 Reinstatement Fee I will be assessed.
2. **TIMELINES:** I have received a copy of the timeline with all important dates, including registration dates, payment due dates, and the dates that Extended Day and Enrichment Classes begin and end. (Timeline is on front cover.)
3. **CLASS TIMES:** I understand the times of Extended Day, Enrichment Classes, and Homework Assistance as listed on page 5 and on the Master Schedule of Enrichment Classes provided in this registration packet.
4. **PAYMENTS:** *(Please initial each item below on the line)*
 - ☐ **MUST BE SUBMITTED** by check or money order only payable to Briargrove Elementary School. Cash is not accepted.
 - ☐ If I choose the Bi Weekly Option or the 4 Month Payment Plan for Full or Half Time Ext Day, I will pay at least the minimum due on the due dates, as stated on the front cover page and on page 5. In addition, I understand the 4 Month Payment Plan option is the only payment option for Enrichment Classes.
 - ☐ I will be assessed a monthly late fee of \$10.00 after Sept. 9, Oct. 14, Nov. 11.
 - ☐ I will be assessed a \$35.00 charge for each returned check. After 2 returned checks, payment must be made by money order. Upon notification that a check was returned by my bank, I understand that I must submit a money order for the same amount within 48 hrs. Failure to do so will result in suspension of services.
 - ☐ I understand that after school services may be suspended if I do not pay my bill on time. In addition, any accounts with **outstanding balances remaining after December 9, 2016 will be assessed a \$25.00 fee which will be rolled over to the Spring 2017 semester.** Also, any Spring 2017 outstanding balance I may have in my account after May 19 will be rolled over to Fall 2017 with a \$25.00 rollover fee. Failure to meet your financial obligations may result in suspension of services to you.
5. **ADD/DROP:** Only 2 changes are permitted during Add/Drop. No class changes will be made and **no refunds or credits** will be issued after Sept.13.
6. **PRORATION OF CLASSES:** ANY class attended from Sept. 6-13 will be prorated. In addition, if you withdraw from a class, your bill will be prorated ONLY if your child is required to attend Tutoring Classes by his/her school teacher or if your child withdraws from Briargrove Elementary School. **In addition, no refunds will be assessed in the event of HISD canceling after-school activities for inclement weather or any other extenuating circumstances or if your child is absent from the school or after school.**
7. **OCCASIONAL DAYS:**
 - If I purchase Occasional Days and all units are used, another 5-Unit Occasional Card will be **automatically billed** to my account.
 - I understand that any Occasional Day purchases billed after NOV 22 **MUST BE PAID WITHIN IN 24 HOURS** OR THERE WILL BE NO SERVICES PROVIDED.



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Contract Agreement/Safety Plan

Fall 2016

8. **SIGNING CHILDREN OUT:** Either myself or other individuals authorized to pick up my child **must sign my child out** from the After School Staff. Failure to sign the student out will be regarded as an "Incident" and may result in suspension from the program for the remaining school year. **SHOWING PHOTO ID IS MANDATORY.**
9. **ENRICHMENT CLASSES BEGINNING AFTER 3:30 ONLY:** I **must** enroll my child in either a 3:30 enrichment class, Bridge UNTIL class time of Enrichment, or Occasional Extended Day in order for my child to participate in an Enrichment Class after 3:30.
10. **LATE PICK UP:**
- If my child is picked up after 6:30 PM I understand I will be assessed a late pickup fee of **\$5.00/minute.**
 - When I am late picking up my child from Full Time, Half-Time or Enrichment, I understand I will be **automatically issued a 5-Unit Occasional Card**, which provides supervision until 6:30 PM.
 - After the 5th late pick-up I may be asked to make other arrangements for After School Child Care.
 - The official time for our after school program will be gauged by the school clock.
 - **Please Note: If late pick-up fees are not paid within 24 hours, the fee is automatically doubled** (Check or money order only).
11. **CHANGES IN HOW A STUDENT GETS HOME:** I **MUST** notify the ASP Coordinator **in writing** (phone calls **not** accepted) via faxed or written note dropped off in the **ASP Office or in the ASP Box** (located in front school office) OR via **email (ciasp2@sbcglobal.net)** for **ANY** changes in how my child gets home. **ONLY** the adult who registers the child is authorized to make changes in regards to pick up arrangements. **Without written permission, my child will not be permitted to leave.**
13. **BEHAVIOR EXPECTATIONS:** The HISD Code of Student Conduct will serve as the basis for all discipline expectations to ensure the safety of all students and staff members. Parents will be notified immediately if their child has violated any portion of the school's previously communicated Code of Student Conduct. Services will be suspended should disrespectful or unsafe behavior be directed towards a student or staff member, either by a parent of a student or a student enrolled in the program. I understand that it is my responsibility for reading and knowing the expectations of the HISD Code of Conduct. I also understand that the program reserves the right to deny services on a permanent basis if behavior expectations are not being met.
14. **SPECIAL NEEDS:** We do not provide staff trained to deal with special needs. Please contact the school administration with any questions.
15. **TECHNOLOGY DEVICES:** No technology devices may be used in the after school program by any student in grades K-5. All such devices must be kept in the student's backpack.
16. I understand that my email address and/or phone number(s) may be given to the Provider of any Enrichment class in which I have enrolled my child should the Provider find it necessary to contact me.
17. **MEDIA PERMISSION:** I authorize the Briargrove Elementary After School Program to include my child in photographs used for publicity YES NO

_____/_____/_____/_____
Name of Parent (please print) Parent Signature Date **STUDENT NAME**

_____/_____/_____/_____
Name of Parent (please print) Parent Signature Date **STUDENT NAME**



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AUTHORIZATION/EMERGENCY FORM FALL 2016

Only the individuals listed on the Tuition Fee Payment Form are authorized to make any changes to this form.

Student Name _____ Grade Level 2016-2017 _____ Homeroom Teacher (Office Use Only) _____

Father's Name _____ Mother's Name _____

Father's Home Phone# _____ Father's Work Phone# _____ Father's Cell Phone# _____

Mother's Home Phone# _____ Mother's Work Phone# _____ Mother's Cell Phone# _____



FOR EARLY DISMISSAL: Will your child be a 3:00 Bus Rider? ☐ YES ☐ NO

Individuals authorized to pick up my child are:

Name _____ Work Phone # _____ Home Phone# _____ Other Phone# _____

Name _____ Work Phone# _____ Home Phone# _____ Other Phone# _____

Name _____ Work Phone# _____ Home Phone# _____ Other Phone# _____

Name _____ Work Phone# _____ Home Phone# _____ Other Phone# _____

My child is allergic to the following: _____

Please note:

1. It is important you notify the After School Program **in writing** when you have updated information such as an address change, individuals you authorize to pick up your child, foods your child may be allergic to, etc.
2. On any given day someone **NOT** listed on the ASP Authorization/Emergency Form needs to pick up your child, the After School Office must receive notification in writing (no later than 1:00PM – or 11:00 a.m. on Wednesdays) from the parent or the individual registering the student. You **MUST** notify the After School Office as follows:
 - A. email this notification to: ciasp2@sbcglobal.net
 - B. Fax it to: 713-917-3601 and address the note to the attention of After School Program.
 - C. Drop off a note in the After School Program box located in the front school office.
 - D. Drop off a note in the After School Program office.
3. Please be aware that we will NOT release your child to anyone unless we have it in writing. We will not make any exceptions. **Also: we will not release your child to anyone under the age of 18.**



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TUITION/FEE PAYMENT FORM – FALL 2016

<hr/> Student Name	<hr/> Grade Level 2016-2017	<hr/> Homeroom Teacher (OFFICE USE ONLY)
<hr/> Name of person responsible for account/billing/changes	<hr/> Relationship to child	<hr/> Contact Phone Number(s)
<hr/> Name of person responsible for account/billing/changes	<hr/> Relationship to child	<hr/> Contact Phone Number(s)
<hr/> Billing Street Address	<hr/> / City	<hr/> / State / ZIP

Email Contact for person(s) responsible for billing
 I authorize the After School Program to disclose any information regarding my account to the following individual(s) (if applicable):

Name(s) _____

A. AFTER SCHOOL Extended Day Options (Write in the amount(s) for all that apply:

<u>Extended Day Option:</u>	<u>Fall Tuition</u>	<u>Spring Tuition</u>	<u>Minimum Pymt</u>	<u>Total Submitted</u>
Full-Time Plus (Until 6:30)	Fall \$ 1105.00	Spring \$ 1300.00	\$ 130.00 (BIWEEKLY)	\$ _____
Full-Time (Until 6:00)	Fall \$ 935.00	Spring \$ 1100.00	\$ 110.00 (BIWEEKLY)	\$ _____
Half-Time (Until 5:00)	Fall \$ 722.50	Spring \$ 852.50	\$ 85.00 (BIWEEKLY)	\$ _____
Occasional Days/5 Unit Increments	\$ 80.00 (5); \$ 160.00 (10); \$240 (15)		\$ 80.00 (5 Units)	\$ _____
Bridge Enrichment to 4:30	Fall \$ 70.00/day	Spring \$ 90.00/day	\$ 70.00/day	\$ _____
Early Dismissal Only	\$15.00/day (5 days total)		\$ 15.00/day	\$ _____
Supply Fee for Ext Day OR Occ (\$50.00/semester)			\$ 50.00/day	\$ _____
Fee-based Homework Help	Fall \$ 115.00/day	Spring \$ 150.00/day	\$ 115.00/day	\$ _____
Total for Extended Day Options				\$ _____ (A)

B. Total Tuition for Enrichment Class(es) (Calculation of 1/4 pymt \$ _____) \$ _____ (B)

List the total cost for your first option for Enrichment Classes on ITEM B below. If you do not get your 1st choice, the 2nd payment due by SEPT. 2 will be adjusted. If you pay the entire amount NOW based on your first choice, your bill will be adjusted accordingly.

C. Total Fees for Enrichment Classes \$ _____ (C)

D. Early Registration Fee \$ 15.00 (D)

E. Late Registration Fee (See timeline on front cover) \$ 25.00 (E)

Grand Total of A-E: \$ _____ (F)

Payment submitted: \$ _____

REMEMBER TO SUBMIT YOUR 2ND PAYMENT BY SEPTEMBER 2.

- Must be at least 1/4 of Grand Total. If purchasing only occasional days, please pay in full.

Please Initial:

1. _____ Registration in the Extended Day Program is an acceptance of the Contract Agreement/Safety Plan.
- 2a. _____ I have submitted full payment based on my 1st choice for enrichment classes. I understand that the amount due may increase or decrease if my first choice is not met. The After School Program will adjust my account accordingly and I will submit my payment (if necessary) by SEPT. 2, 2016.
- 2b. _____ I am paying 1/4 of the Grand Total based on my 1st choice for Enrichment Classes. I understand that the amount due may increase or decrease if my first choice is not met. My account will be adjusted accordingly and I will submit payment by SEPT. 2, 2016.
3. _____ I understand that a late payment fee of \$10.00 will be added to my account if I do not submit my 2nd, 3rd and 4th payments by the due dates as specified on the Contract Agreement/Safety Plan.

<hr/> Name (person responsible for bill)	<hr/> Signature	<hr/> Date
<hr/> Name (person responsible for bill)	<hr/> Signature	<hr/> Date